

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

New Millennium PAC

ADDRESS (number and street)

700 13th Street NW

Suite 600

Washington

DC

20005

☐ Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00349233

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
03 01 2018

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Antun, Abraham, , ,

Type or Print Name of Treasurer

Signature of Treasurer

Antun, Abraham, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 30 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

New Millennium PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
03		01		2018

To:

M M	/	D D	/	Y Y Y Y Y
03		31		2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2018</div></div>		<div><div></div><div>39402.22</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>9857.08</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>49939.05</div></div>	<div><div></div><div>66778.01</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>59796.13</div></div>	<div><div></div><div>106180.23</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>34540.32</div></div>	<div><div></div><div>80924.42</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<div><div></div><div>25255.81</div></div>	<div><div></div><div>25255.81</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>1085.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

New Millennium PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	8

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2000.00	2000.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2000.00	2000.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	13500.00	26000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	15500.00	28000.00
12. Transfers From Affiliated/Other Party Committees.....	34439.05	38778.01
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	49939.05	66778.01
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	49939.05	66778.01

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	8040.32	43424.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8040.32	43424.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	31500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	5000.00	6000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	34540.32	80924.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34540.32	80924.42

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15500.00	28000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15500.00	28000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	8040.32	43424.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8040.32	43424.42

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 19

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Halpern, Jack, , ,**

Mailing Address 160 W. 66th St

City  
New York

State  
NY

Zip Code  
10023

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Atlantic Realty

Occupation (for Individual)  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 12 / 2018

**Transaction ID : C11457030A**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

\* Earmarked Contribution: See Below

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NORPAC**

Mailing Address PO Box 1543

City  
Englewood Cliffs

State  
NJ

Zip Code  
07632-0543

FEC ID number of contributing  
federal political committee.

C C00247403

Name of Employer (for Individual)

Occupation (for Individual)  
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2018

**Transaction ID : C11457030AB**

Amount of Each Receipt this Period

2000.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 19

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. National Association of Realtors PAC**

Mailing Address 430 North Michigan Avenue

City  
Chicago

State  
IL

Zip Code  
60611

FEC ID number of contributing  
federal political committee.

**C** C00030718

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **22** / **2018**

**Transaction ID : C11457016**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. Border Health Federal PAC**

Mailing Address 612 West Nolana  
Suite 340

City  
McAllen

State  
TX

Zip Code  
78504

FEC ID number of contributing  
federal political committee.

**C** C00415752

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**03** / **06** / **2018**

**Transaction ID : C11454017**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. AT&T, Inc. Federal Political Action Committee**

Mailing Address 208 South Akard Street  
Suite 1812

City  
Dallas

State  
TX

Zip Code  
75202

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**03** / **22** / **2018**

**Transaction ID : C11457017**

Amount of Each Receipt this Period

2500.00

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

12500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 19

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. National Multifamily Housing Council PAC**

Mailing Address 1775 Eye St NW  
Suite 1100

City  
Washington

State  
DC

Zip Code  
20006

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 30 / 2018

**Transaction ID : C11458768**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

13500.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 19

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New Millennium PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Menendez Victory Fund**

Mailing Address PO Box 32248

City  
NewarkState  
NJZip Code  
07102FEC ID number of contributing  
federal political committee.

C C00479501

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

38778.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2018

Transaction ID : C11456795

Amount of Each Receipt this Period

14884.83

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Hegyi, Albert, P., ,**

Mailing Address 245 Park Avenue, 39th Floor

City  
New YorkState  
NYZip Code  
10167FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
First Financial Bank USAOccupation (for Individual)  
Banker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	12	/	2018

Transaction ID : C11456800

Amount of Each Receipt this Period

400.00

☒ Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. International Longshoremen's Association AFL-CIO COPE**

Mailing Address 5000 West Side Avenue

City  
North BergenState  
NJZip Code  
07047FEC ID number of contributing  
federal political committee.

C C00158576

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	26	/	2018

Transaction ID : C11456796

Amount of Each Receipt this Period

5000.00

☒ Memo Item

\*

SUBTOTAL of Receipts This Page (optional).....▶

14884.83

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 19

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Salcedo, Jorge, , ,**

Mailing Address 606 San Antonio Avenue

City  
Miami

State  
FL

Zip Code  
33146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2018

**Transaction ID : C11456797**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Barr, Edward, E., ,**

Mailing Address 26110 Mandevilla Dr

City

Bonita Springs

State

FL

Zip Code

34134

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2018

**Transaction ID : C11456798**

Amount of Each Receipt this Period

4800.00

☒ Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Menendez Victory Fund**

Mailing Address PO Box 32248

City

Newark

State

NJ

Zip Code

07102

FEC ID number of contributing  
federal political committee.

C C00479501

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

38778.01

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 31 / 2018

**Transaction ID : C11458448**

Amount of Each Receipt this Period

19554.22

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

19554.22

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 19  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zuberi, Imaad, , ,**

Mailing Address 10166 Rush Street

City

South El Monte

State

CA

Zip Code

91733

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Avenue Ventures

Occupation (for Individual)

Vice Chairman

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2018

**Transaction ID : C11458450**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rao, Willa, , ,**

Mailing Address 10166 Rush Street

City

South El Monte

State

CA

Zip Code

91733

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CAI Industries

Occupation (for Individual)

Owner

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2018

**Transaction ID : C11458462**

Amount of Each Receipt this Period

4800.00

☒ Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. New Jersey State Laborers' PAC**

Mailing Address 104 Interchange Plaza

Suite 301

City

Monroe Twp

State

NJ

Zip Code

08831

FEC ID number of contributing  
federal political committee.

C

C00214643

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary

☐ General

☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 29 / 2018

**Transaction ID : C11458464**

Amount of Each Receipt this Period

5000.00

☒ Memo Item

\*

**SUBTOTAL** of Receipts This Page (optional)..... ►

0.00

**TOTAL** This Period (last page this line number only)..... ►

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 19

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

New Millennium PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Graham, John, , ,

Mailing Address 6 Statford Drive

City  
LivingstonState  
NJZip Code  
07039FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fairview Insurance Agency AssociatesOccupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
03	/	29	/	2017

Transaction ID : C11458467

Amount of Each Receipt this Period

5000.00

☒ Memo Item

\*

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

34439.05

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Millennium PAC

Full Name (Last, First, Middle Initial)

**A. GLH Consulting**Mailing Address 425 Massachusetts Ave NW  
Apt 1128City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		09		2018

FEC Identification Number

C

Transaction ID : D808784

Amount of Each Disbursement this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Maltzman, Samantha, , ,**

Mailing Address 10706 Brewer House Road

City  
North BethesdaState  
MDZip Code  
20852Purpose of Disbursement  
Fundraising Consulting Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		05		2018

FEC Identification Number

C

Transaction ID : D808785

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chase Card Services**

Mailing Address P.O. Box 1423

City  
CharlotteState  
NCZip Code  
28201Purpose of Disbursement  
Credit Card Payment, See Below

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		26		2018

FEC Identification Number

C

Transaction ID : D808786

Amount of Each Disbursement this Period

1040.32

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8040.32

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Millennium PAC

Full Name (Last, First, Middle Initial)

**A. Lahinch Tavern & Grill**

Mailing Address 7747 Tuckerman Ln

City  
PotomacState  
MDZip Code  
20854Purpose of Disbursement  
Meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2018

FEC Identification Number

C

Transaction ID : D808794

Amount of Each Disbursement this Period

103.54

☒ Memo Item

Full Name (Last, First, Middle Initial)

**B. Morton's Steakhouse**

Mailing Address 1050 Connecticut Avenue, NW

City  
WashingtonState  
DCZip Code  
20036Purpose of Disbursement  
Meals

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2018

FEC Identification Number

C

Transaction ID : D808797

Amount of Each Disbursement this Period

167.31

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

0.00

8040.32

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Friends Of Chris Murphy**

Mailing Address P.O. Box 127

City  
CheshireState  
CTZip Code  
06410Purpose of Disbursement  
Contribution

Candidate Name

**Murphy, Chris, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	8		

FEC Identification Number

**C** C00492645**Transaction ID : D808580**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. New Jersey/Rockland Jewish Media Group**

Mailing Address 1086 Teaneck Rd

City  
TeaneckState  
NJZip Code  
07666Purpose of Disbursement  
In-Kind Advertisement to Menendez for Senate

Candidate Name

**Menendez, Robert, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			3	0			2	0	1	8		

FEC Identification Number

**C** C00264564**Transaction ID : D809421**

Amount of Each Disbursement this Period

480.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

**C. Darren Soto for Congress**

Mailing Address PO Box 420239

City  
KissimmeeState  
FLZip Code  
34742Purpose of Disbursement  
Contribution

Candidate Name

**Soto, Darren, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL

District: 09

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	8		

FEC Identification Number

**C** C00581074**Transaction ID : D808566**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Bill Nelson for US Senate**

Mailing Address 972 W Whitmire Drive

City  
MelbourneState  
FLZip Code  
32935Purpose of Disbursement  
Contribution

Candidate Name

**Nelson, Bill, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	8		

FEC Identification Number

**C** C00344051**Transaction ID : D808567**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Ben Cardin For Senate**

Mailing Address P.O. Box 21093

City  
CatonsvilleState  
MDZip Code  
21228Purpose of Disbursement  
Contribution

Candidate Name

**Cardin, Benjamin, L., ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	8		

FEC Identification Number

**C** C00411587**Transaction ID : D808568**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JWMW, LLC**

Mailing Address 1501 Broadway, Suite 505

City  
New YorkState  
NYZip Code  
10036Purpose of Disbursement  
In-Kind Advertisement to Menendez for Senate

Candidate Name

**Menendez, Robert, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	9			2	0	1	8		

FEC Identification Number

**C** C00264564**Transaction ID : D809638**

Amount of Each Disbursement this Period

605.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**New Millennium PAC**

Full Name (Last, First, Middle Initial)

**A. Ben Cardin For Senate**

Mailing Address P.O. Box 21093

City  
CatonsvilleState  
MDZip Code  
21228Purpose of Disbursement  
Contribution

Candidate Name

**Cardin, Benjamin, L., ,**Office Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2018  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	8			2	0	1	8		

FEC Identification Number

**C** C00411587**Transaction ID : D808569**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

21500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 19

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

New Millennium PAC

Full Name (Last, First, Middle Initial)

**A. Alzheimer's Association Greater New Jersey**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2018

Mailing Address 3 Eves Drive  
Suite 310City  
MarltonState  
NJZip Code  
08053Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : D808173

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

**TOTAL** This Period (last page this line number only).....▶

5000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 19 OF 19

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

New Millennium PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Jersey/Rockland Jewish Media Group

Nature of Debt (Purpose):

In-Kind Advertisement

Mailing Address 1086 Teaneck Rd

City  
TeaneckState  
NJZip Code  
07666

Outstanding Balance Beginning This Period

0.00

Transaction ID : D809167

Amount Incurred This Period

480.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

480.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

JWMW, LLC

Nature of Debt (Purpose):

In-Kind Advertisement

Mailing Address 1501 Broadway, Suite 505

City  
New YorkState  
NYZip Code  
10036

Outstanding Balance Beginning This Period

0.00

Transaction ID : D809639

Amount Incurred This Period

605.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

605.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

1085.00

2) **TOTALS** This Period (last page this line number only)..... ►

1085.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

1085.00